

Sensitive but Unclassified (SBU) Information

USDA - FNS
REPORT OF NEGATIVE INVESTIGATION

STORE NAME AND ADDRESS	CASE IDENTIFICATION NUMBER	DATE
ZS FOOD MART	HO01974	4/16/2018
3719 LOCKWOOD	AREA OFFICE	
HOUSTON, TX 77026	Houston, TX - RIB	

A. During the subject investigation 0 Confidential Informant(s) 1 Investigator(s) made a total of 3 visit(s) to the subject store. During these transactions, attempts made to purchase ineligible items were refused, and no other program violations occurred.

Number of Surveillance Visit(s) 0

Number of Client Interview(s) 0

Exhibit ID	Pass Result	Refusal Date	CI/Investigator	Refusals	Description of Clerk
A	F	2/28/2018	Investigator		M, 50-55 yrs, 5'6"-5'9", 195-205 lbs, Brown hair color, Clerk was standing behind a plexiglass enclosure. Clerk had a mustache and goatee.
B	N	3/6/2018	Investigator	18 count pack of Kordite Plastic Cups	M, 50-55 yrs, 5'6"-5'9", 195-205 lbs, Brown hair color, Clerk same as Exhibit A
C	N	3/12/2018	Investigator	Roll of Soft Bathroom Tissue	M, 50-55 yrs, 5'6"-5'9", 195-205 lbs, Brown hair color, Clerk same as Exhibit A

B. REMARKS

C. In the absence of indications that the subject store violates program regulations the investigation was terminated and the case is closed.

CERTIFICATION:

This report consists of 3 exhibit(s) letter(s) A to C totaling 7 page(s). The facts stated in this declaration are true to my knowledge. If I am called to testify as a witness in any proceeding, I am competent to testify to the matters stated herein. Further declarant sayeth not. I declare under penalty of perjury the foregoing is true and correct.

SIGNATURE OF INVESTIGATOR



US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT

HO01974
02/28/2018EXHIBIT A
RESULT: F

DETAILS OF TRANSACTION/VISIT :

I, [REDACTED] Investigator, Food and Nutrition Service, United States Department of Agriculture, make the following statement freely and voluntarily, knowing that this statement may be used in evidence.

On the above date, at about (time) 1:34 PM. I entered subject store. As the clerk rang up the items, my issued Electronic Benefits Transfer (EBT) card was where it could be viewed by the clerk. I gave the clerk the EBT card, which had a total of \$299.12 in Supplemental Nutrition Assistance Program (SNAP) benefits. The clerk deducted \$4.77 for items purchased from the investigative EBT account. I departed the store at about 1:39 PM.

I placed the listed food items on the counter along with my issued EBT card. The clerk who was standing behind a plexiglass enclosure rang up the listed items charging them to my EBT card. The clerk provided me with an EBT receipt, made no comments and I left the store.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT	HO01974 02/28/2018	EXHIBIT A RESULT: F
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CLERK INFORMATION

SEX	AGE	HEIGHT	WEIGHT	HAIR	OTHER IDENTIFIERS
M	50-55	5'6" - 5'9"	195 - 205	Brown	Clerk was standing behind a plexiglass enclosure. Clerk had a mustache and goatee.
Identification During Transaction as: (Name)			(Title, Relationship to Owner):		Means of Identification:
Unknown			Unknown		N/A

EBT BENEFITS ISSUED, USED AND RETURNED:

EBT Card Number	Issued Value	Used Value	Returned Value
[REDACTED]	\$299.12	\$4.77	\$294.35

EBT RECEIPT: Y	CASH REGISTER RECEIPT: N	SALES TAX CHARGED: N/A	AMOUNT CHARGED: N/A
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AMOUNT OF PURCHASE [if known]	BENEFITS TRAFFICKED [if applicable]	CASH RECEIVED [if applicable]
\$4.77	N/A	N/A

MERCHANDISE RECEIVED [if applicable]:

QUANTITY	DESCRIPTION OF ITEM	TYPE	PRICE
1	20 OZ. bottle of soda	E	NPI
1	3 3/8 OZ. bag of Cheetos Puffs Cheese Flavored Snacks	E	1.69
1	1.74 OZ. bag of M & M's Chocolate Candies	E	NPI

NPI - NO PRICE INDICATED OR ILLEGIBLE

TYPE: E - ELIGIBLE, I - INELIGIBLE, M - MAJOR INELIGIBLE, R - REFUSAL, C - CREDIT, F - FREE / NO CHARGE

TRAFFICKING CASH DATA [if applicable]:

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT

HO01974
03/06/2018EXHIBIT B
RESULT: N

DETAILS OF TRANSACTION/VISIT :

I [REDACTED] investigator, Food and Nutrition Service, United States Department of Agriculture, make the following statement freely and voluntarily, knowing that this statement may be used in evidence.

On the above date, at about (time) 11:24 AM. I entered subject store. As the clerk rang up the items, my issued Electronic Benefits Transfer (EBT) card was where it could be viewed by the clerk. I gave the clerk the EBT card, which had a total of \$230.61 in Supplemental Nutrition Assistance Program (SNAP) benefits. The clerk deducted \$4.59 for items purchased from the investigative EBT account. I departed the store at about 11:29 AM.

I placed the listed food items and the non-food item on the counter along with my issued EBT card. The clerk who was standing behind a plexiglass enclosure rang up the listed food items charging them to my EBT card, but refused to charge the non-food item to my EBT card. The clerk returned my EBT card and provided me with an EBT receipt. The clerk made no further comments and I left the store.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORTHO01974
03/06/2018EXHIBIT B
RESULT: N**CLERK INFORMATION**

SEX	AGE	HEIGHT	WEIGHT	HAIR	OTHER IDENTIFIERS
M	50-55	5'6" - 5'9"	195 - 205	Brown	Clerk same as Exhibit A
Identification During Transaction as: (Name)			(Title, Relationship to Owner):		Means of Identification:
Unknown			Unknown		N/A

EBT BENEFITS ISSUED, USED AND RETURNED:

EBT Card Number	Issued Value	Used Value	Returned Value
[REDACTED]	\$230.61	\$4.59	\$226.02

EBT RECEIPT: Y	CASH REGISTER RECEIPT: N	SALES TAX CHARGED: N/A	AMOUNT CHARGED: N/A
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AMOUNT OF PURCHASE [if known]	BENEFITS TRAFFICKED [if applicable]	CASH RECEIVED [if applicable]
\$4.59	N/A	N/A

MERCHANDISE RECEIVED [if applicable]:

QUANTITY	DESCRIPTION OF ITEM	TYPE	PRICE
1	4 1/2 OZ. bag of Chester's Puffcorn Cheese Flavored Snacks	E	2.00
1	2 liter bottle of soda	E	NPI
1	18 count pack of Kordite Plastic Cups	R	

NPI - NO PRICE INDICATED OR ILLEGIBLE

TYPE: E - ELIGIBLE, I - INELIGIBLE, M - MAJOR INELIGIBLE, R - REFUSAL, C - CREDIT, F - FREE / NO CHARGE

TRAFFICKING CASH DATA [if applicable]:

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORTHO01974
03/12/2018EXHIBIT C
RESULT: N**DETAILS OF TRANSACTION/VISIT :**

██████████ Investigator, Food and Nutrition Service, United States Department of Agriculture, make the following statement freely and voluntarily, knowing that this statement may be used in evidence.

On the above date, at about (time) 11:38 AM. I entered subject store. As the clerk rang up the items, my issued Electronic Benefits Transfer (EBT) card was where it could be viewed by the clerk. I gave the clerk the EBT card, which had a total of \$160.05 in Supplemental Nutrition Assistance Program (SNAP) benefits. The clerk deducted \$5.78 for items purchased from the investigative EBT account. I departed the store at about 11:42 AM.

I placed the listed food items and the non-food item on the counter along with my issued EBT card. The clerk who was standing behind a plexiglass enclosure rang up the mentioned food items charging them to my EBT card, but refused to charge the non-food item to my EBT card. The clerk returned my EBT card and provided me with an EBT receipt for the purchased food items. The clerk made no further comments and I left the store.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT	HO01974 03/12/2018	EXHIBIT C RESULT: N
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CLERK INFORMATION

SEX	AGE	HEIGHT	WEIGHT	HAIR	OTHER IDENTIFIERS
M	50-55	5'6" - 5'9"	195 - 205	Brown	Clerk same as Exhibit A
Identification During Transaction as: (Name)			(Title, Relationship to Owner):		Means of Identification:
Unknown			Unknown		N/A

EBT BENEFITS ISSUED, USED AND RETURNED:

EBT Card Number	Issued Value	Used Value	Returned Value
[REDACTED]	\$160.05	\$5.78	\$154.27

EBT RECEIPT: Y	CASH REGISTER RECEIPT: N	SALES TAX CHARGED: N/A	AMOUNT CHARGED: N/A
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AMOUNT OF PURCHASE [if known]	BENEFITS TRAFFICKED [if applicable]	CASH RECEIVED [if applicable]
\$5.78	N/A	N/A

MERCHANDISE RECEIVED [if applicable]:

QUANTITY	DESCRIPTION OF ITEM	TYPE	PRICE
1	20 OZ. bottle of soda	E	NPI
1	13 OZ. pack of Nabisco Chips Ahoy Cookies	E	NPI
1	Roll of Soft Bathroom Tissue	R	

NPI - NO PRICE INDICATED OR ILLEGIBLE

TYPE: E - ELIGIBLE, I - INELIGIBLE, M - MAJOR INELIGIBLE, R - REFUSAL, C - CREDIT, F - FREE / NO CHARGE

TRAFFICKING CASH DATA [if applicable]:

6. Donated Items

RIB Tracking Number: HO01974**Exhibit ID:** A

I certify that I received the following item(s) for use by my organization from the USDA Employee [REDACTED]
(Houston, TX - RIB).

Items List:

Quantity	Description
1	20 OZ. bottle of soda
1	3 3/8 OZ. bag of Cheetos Puffs Cheese Flavored Snacks
1	1.74 OZ. bag of M & M's Chocolate Candies

Donation Date: 02/28/2018**Donated By:** [REDACTED] (Houston, TX - RIB)**Donation Organization:** FamilyTime Crisis & Counseling Center**Donation Receiver****Name:** [REDACTED]**Title:** Receiver**Organization Site Address and Phone****Address:**1203 S. Houston Ave
Humble, Texas 77338**Phone:** (281) 446-2615

The property item(s) donated as certified in Section 6 have been found to have no commercial value or the estimated cost of continued care and handling would exceed the estimated proceeds from the sale.

Receiver's Signature:
[REDACTED]**Investigator Signature:**
[REDACTED]

6. Donated Items

RIB Tracking Number: HO01974

Exhibit ID: B

I certify that I received the following item(s) for use by my organization from the USDA Employee [REDACTED]
(Houston, TX - RIB).

Items List:

Quantity	Description
1	4 1/2 OZ. bag of Chester's Puffcorn Cheese Flavored Snacks
1	2 liter bottle of soda

Donation Date: 03/08/2018

Donated By [REDACTED] (Houston, TX - RIB)

Donation Organization: FamilyTime Crisis & Counseling Center

Donation Receiver

Name: [REDACTED]

Title: Receiver

Organization Site Address and Phone

Address:

1203 S. Houston Ave
Humble, Texas 77338

Phone: (281) 446-2615

The property item(s) donated as certified in Section 6 have been found to have no commercial value or the estimated cost of continued care and handling would exceed the estimated proceeds from the sale.

Receiver's Signature:

[REDACTED]

Investigator Signature:

[REDACTED]

6. Donated Items

RIB Tracking Number: H001974

Exhibit ID: C

I certify that I received the following item(s) for use by my organization from the USDA Employee [REDACTED]
(Houston, TX - RIB).

Items List:

Quantity	Description
1	20 OZ. bottle of soda
1	13 OZ. pack of Nabisco Chips Ahoy Cookies

Donation Date: 03/19/2018

Donated By: [REDACTED] (Houston, TX - RIB)

Donation Organization: FamilyTime Crisis & Counseling Center

Donation Receiver

Name: [REDACTED]

Title: Receiver

Organization Site Address and Phone

Address:

1203 S. Houston Ave
Humble, Texas 77338

Phone: (281) 446-2615

The property item(s) donated as certified in Section 6 have been found to have no commercial value or the estimated cost of continued care and handling would exceed the estimated proceeds from the sale.

Receiver's Signature:

[REDACTED]

Investigator Signature:

[REDACTED]

H081974 2/28/18

Ex: A Z'S FOOD MART
3719 LOCKWOOD DR. SUITE A
HOUSTON, TX 77026
713-672-2500
27470014653402

Merchant ID: 27470014653402
Record Num.: 0008

Sale

4982 Exp: XX/XX

EBT Food Stamp Entry Method: Swiped

Total: USD\$ 4.77

02/28/18 13:39:46

Inv#: 000009 Appr Code: 979522

Apprvd: Online Batch#: 000512

RRN: 979522

Food Stamp Balance: \$ 294.35

NO SIGNATURE REQUIRED

THANK YOU!
PLEASE COME AGAIN!

MERCHANT COPY

H081974 3/6/18

Ex: B Z'S FOOD MART
3719 LOCKWOOD DR. SUITE A
HOUSTON, TX 77026
713-672-2500
27470014653402

Merchant ID: 27470014653402
Record Num.: 0011

Sale

4982 Exp: XX/XX

EBT Food Stamp Entry Method: Swiped

Total: USD\$ 4.59

03/06/18 11:29:22

Inv#: 000011 Appr Code: 010559

Apprvd: Online Batch#: 000519

RRN: 010559

Food Stamp Balance: \$ 226.02

H081974
NO SIGNATURE REQUIRED

THANK YOU!
PLEASE COME AGAIN!

MERCHANT COPY

H081974 3/12/18

Ex: C Z'S FOOD MART
3719 LOCKWOOD DR. SUITE A
HOUSTON, TX 77026
713-672-2500
27470014653402

Merchant ID: 27470014653402
Record Num.: 0004

Sale

4982 Exp: XX/XX

EBT Food Stamp Entry Method: Swiped

Total: USD\$ 5.78

03/12/18 11:42:41

Inv#: 000004 Appr Code: 989540

Apprvd: Online Batch#: 000525

RRN: 989540

Food Stamp Balance: \$ 154.27

NO SIGNATURE REQUIRED

THANK YOU!
PLEASE COME AGAIN!

MERCHANT COPY



H001974 2/28/18
 EX: A
 35 S. FARM ROAD
 7503 LUGANOW, CA 94506
 925-452-2500
 214-760-5651/42
 PURCHASE ID: 27473814653462
 RECEIVED FROM: 8880

Sale	
4362	Exp: 11/18
EBT Food Stamp	Extra Method: Saled
Total:	US\$ 4.77
02/28/18	13:31:46
Inv#: 000003	Appr Code: 979622
Apprvt: Online	Batch#: 000512
PN#: 979622	
Food Stamp Balance:	\$ 294.35

NO SIGNATURE REQUIRED
 THANK YOU!
 PLEASE CLERK AGAIN!
 RECEIPT COPY

02/28/2018



H08974 3/12/18
 Ex: C 2nd FORD PART
 3718 LOCKWOOD DR. SUITE A
 HOUSTON, TX 77056
 TEL: 672-2500
 2747081463402
 Merchant ID: 2747081463402
 Record No.: 8884
Sale
 4562 Exp: 12/18
 EBT Food Stamp Entry Method: Swiped
 Total: USD 5.78
 03/12/18 11:42:41
 Trans: 000004 Appr Code: 995640
 Approval: On Line Batch#: 000525
 RRR: 995640
 Food Stamp Balance: \$ 154.27
 NO SIGNATURE REQUIRED
 THANK YOU
 PLEASE COPE AGAIN
 MERCHANT COPY



03/12/2018

Sensitive but Unclassified (SBU) Information

USDA - FNS
REPORT OF NEGATIVE INVESTIGATION

STORE NAME AND ADDRESS	CASE IDENTIFICATION NUMBER	DATE
ZS FOOD MART	NA00266	12/11/2019
3719 LOCKWOOD	AREA OFFICE	
HOUSTON, TX 77026	National CR AO	

A. During the subject investigation 0 Confidential Informant(s) 1 Investigator(s) made a total of 3 visit(s) to the subject store. During these transactions, attempts made to purchase ineligible items were refused, and no other program violations occurred.

Number of Surveillance Visit(s) 0

Number of Client Interview(s) 0

Exhibit ID	Pass Result	Refusal Date	CI/Investigator	Refusals	Description of Clerk
A	F	11/13/2019	Investigator		F, 24-29 yrs, 5'6"-5'9", 130-140 lbs, Black hair color, None
B	N	11/14/2019	Investigator	Box of spoons, Bag of bowls	F, 32-37 yrs, 5'8"-5'11", 152-162 lbs, Blonde hair color, None
C	N	11/16/2019	Investigator	Box of sandwich bags, Box of garbage bags, Cash	F, 32-37 yrs, 5'8"-5'11", 152-162 lbs, Blonde hair color, Clerk same as Exhibit B

B. REMARKS

C. In the absence of indications that the subject store violates program regulations the investigation was terminated and the case is closed.

CERTIFICATION:

This report consists of 3 exhibit(s) letter(s) A to C totaling 7 page(s). The facts stated in this declaration are true to my knowledge. If I am called to testify as a witness in any proceeding, I am competent to testify to the matters stated herein. Further declarant sayeth not. I declare under penalty of perjury the foregoing is true and correct.

SIGNATURE OF INVESTIGATOR


US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT

NA00266
11/13/2019EXHIBIT A
RESULT: F

DETAILS OF TRANSACTION/VISIT :

I, [REDACTED] Investigator, Contractor for the Food and Nutrition Service, United States Department of Agriculture, make the following statement freely and voluntarily, knowing that this statement may be used in evidence.

On the above date, at about (time) 02:09 PM. I entered subject store. As the clerk rang up the items, my issued Electronic Benefits Transfer (EBT) card was where it could be viewed by the clerk. I gave the clerk the EBT card, which had a total of \$400.00 in Supplemental Nutrition Assistance Program (SNAP) benefits. The clerk deducted \$10.16 for items purchased from the investigative EBT account. I departed the store at about 02:17 PM.

I entered the subject store, placed all items on the counter, and presented the EBT card to the clerk for purchase. The clerk, identified as [REDACTED] completed the transaction.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT	NA00266 11/13/2019	EXHIBIT A RESULT: F
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CLERK INFORMATION

SEX	AGE	HEIGHT	WEIGHT	HAIR	OTHER IDENTIFIERS
F	24-29	5'6" - 5'9"	130 - 140	Black	None
Identification During Transaction as: (Name) Clarissa			(Title, Relationship to Owner): Unknown		Means of Identification: Self-identified

EBT BENEFITS ISSUED, USED AND RETURNED:

EBT Card Number	Issued Value	Used Value	Returned Value
[REDACTED]	\$400.00	\$10.16	\$389.84

EBT RECEIPT: Y	CASH REGISTER RECEIPT: N	SALES TAX CHARGED: N/A	AMOUNT CHARGED: N/A
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AMOUNT OF PURCHASE [if known]	BENEFITS TRAFFICKED [if applicable]	CASH RECEIVED [if applicable]
\$10.16	N/A	N/A

MERCHANDISE RECEIVED [if applicable]:

QUANTITY	DESCRIPTION OF ITEM	TYPE	PRICE
1	Bag of cinnamon roll	E	1.09
1	Can of spam	E	3.99
1	Bag of candy	E	NPI
1	Bag of chips	E	NPI

NPI - NO PRICE INDICATED OR ILLEGIBLE

TYPE: E - ELIGIBLE, I - INELIGIBLE, M - MAJOR INELIGIBLE, R - REFUSAL, C - CREDIT, F - FREE / NO CHARGE

TRAFFICKING CASH DATA [if applicable]:

*Redacted - MATERIAL DELETED PURSUANT TO 5 U.S.C SECTION 552(b) (6) and 552(b) (7) (C).
FORM FNS-413 (PAGE 3 OF 7) - (7-98) PREVIOUS EDITIONS OBSOLETE.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT

NA00266
11/14/2019EXHIBIT B
RESULT: N

DETAILS OF TRANSACTION/VISIT :

I, [REDACTED] Investigator, Contractor for the Food and Nutrition Service, United States Department of Agriculture, make the following statement freely and voluntarily, knowing that this statement may be used in evidence.

On the above date, at about (time) 03:25 PM. I entered subject store. As the clerk rang up the items, my issued Electronic Benefits Transfer (EBT) card was where it could be viewed by the clerk. I gave the clerk the EBT card, which had a total of \$354.46 in Supplemental Nutrition Assistance Program (SNAP) benefits. The clerk deducted \$10.18 for items purchased from the investigative EBT account. I departed the store at about 3:32 PM.

I entered the subject store, placed all items on the counter, and presented the EBT card to the clerk for purchase. The clerk removed the non-food items and stated that they could not be purchased using SNAP benefits. I asked the clerk to utilize the EBT card for the non-food items and the clerk refused. The clerk then completed the transaction for the food items only.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORTNA00266
11/14/2019EXHIBIT B
RESULT: N**CLERK INFORMATION**

SEX	AGE	HEIGHT	WEIGHT	HAIR	OTHER IDENTIFIERS
F	32-37	5'8" - 5'11"	152 - 162	Blonde	None
Identification During Transaction as: (Name)			(Title, Relationship to Owner):		Means of Identification:
Unknown			Unknown		None

EBT BENEFITS ISSUED, USED AND RETURNED:

EBT Card Number	Issued Value	Used Value	Returned Value
[REDACTED]	\$354.46	\$10.18	\$344.28

EBT RECEIPT: Y	CASH REGISTER RECEIPT: N	SALES TAX CHARGED: N/A	AMOUNT CHARGED: N/A
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AMOUNT OF PURCHASE [if known]	BENEFITS TRAFFICKED [if applicable]	CASH RECEIVED [if applicable]
\$10.18	N/A	N/A

MERCHANDISE RECEIVED [if applicable]:

QUANTITY	DESCRIPTION OF ITEM	TYPE	PRICE
2	Boxes of cereal (@ \$4.59 each)	E	9.18
2	Bags of soup	E	NPI
1	Box of spoons	R	
1	Bag of bowls	R	

NPI - NO PRICE INDICATED OR ILLEGIBLE

TYPE: E - ELIGIBLE, I - INELIGIBLE, M - MAJOR INELIGIBLE, R - REFUSAL, C - CREDIT, F - FREE / NO CHARGE

TRAFFICKING CASH DATA [if applicable]:

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT

NA00266
11/16/2019EXHIBIT C
RESULT: N

DETAILS OF TRANSACTION/VISIT :

I [REDACTED] Investigator, Contractor for the Food and Nutrition Service, United States Department of Agriculture, make the following statement freely and voluntarily, knowing that this statement may be used in evidence.

On the above date, at about (time) 06:12 PM. I entered subject store. As the clerk rang up the items, my issued Electronic Benefits Transfer (EBT) card was where it could be viewed by the clerk. I gave the clerk the EBT card, which had a total of \$344.28 in Supplemental Nutrition Assistance Program (SNAP) benefits. The clerk deducted \$13.06 for items purchased from the investigative EBT account. I departed the store at about 06:22 PM.

I entered the subject store, placed all items on the counter, and presented the EBT card to the clerk for purchase. The clerk removed the non-food items and stated that they could not be purchased using SNAP benefits. I asked the clerk to utilize the EBT card for the non-food items and the clerk refused. The clerk then completed the transaction for the food items only. I asked the clerk for cash back off my EBT card, but the clerk refused.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT

NA00266
11/16/2019EXHIBIT C
RESULT: N**CLERK INFORMATION**

SEX	AGE	HEIGHT	WEIGHT	HAIR	OTHER IDENTIFIERS
F	32-37	5'8" - 5'11"	152 - 162	Blonde	Clerk same as Exhibit B
Identification During Transaction as: (Name)			(Title, Relationship to Owner):		Means of Identification:
Unknown			Unknown		None

EBT BENEFITS ISSUED, USED AND RETURNED:

EBT Card Number	Issued Value	Used Value	Returned Value
[REDACTED]	\$344.28	\$13.06	\$331.22

EBT RECEIPT: Y	CASH REGISTER RECEIPT: N	SALES TAX CHARGED: N/A	AMOUNT CHARGED: N/A
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AMOUNT OF PURCHASE [if known]	BENEFITS TRAFFICKED [if applicable]	CASH RECEIVED [if applicable]
\$13.06	N/A	N/A

MERCHANDISE RECEIVED [if applicable]:

QUANTITY	DESCRIPTION OF ITEM	TYPE	PRICE
1	Bag of chips	E	5.09
1	Bottle of ketchup	E	2.99
1	Bottle of barbecue sauce	E	NPI
1	Package of bread	E	NPI
1	Box of sandwich bags	R	
1	Box of garbage bags	R	
	Cash	R	

NPI - NO PRICE INDICATED OR ILLEGIBLE

TYPE: E - ELIGIBLE, I - INELIGIBLE, M - MAJOR INELIGIBLE, R - REFUSAL, C - CREDIT, F - FREE / NO CHARGE

TRAFFICKING CASH DATA [if applicable]:

Sensitive but Unclassified (SBU) Information

USDA - FNS
REPORT OF NEGATIVE INVESTIGATION

STORE NAME AND ADDRESS	CASE IDENTIFICATION NUMBER	DATE
ZS FOOD MART	NA00266	12/11/2019
3719 LOCKWOOD	AREA OFFICE	
HOUSTON, TX 77026	National CR AO	

A. During the subject investigation 0 Confidential Informant(s) 1 Investigator(s) made a total of 3 visit(s) to the subject store. During these transactions, attempts made to purchase ineligible items were refused, and no other program violations occurred.

Number of Surveillance Visit(s) 0

Number of Client Interview(s) 0

Exhibit ID	Pass Result	Refusal Date	CI/Investigator	Refusals	Description of Clerk
A	F	11/13/2019	Investigator		F, 24-29 yrs, 5'6"-5'9", 130-140 lbs, Black hair color, None
B	N	11/14/2019	Investigator	Box of spoons, Bag of bowls	F, 32-37 yrs, 5'8"-5'11", 152-162 lbs, Blonde hair color, None
C	N	11/16/2019	Investigator	Box of sandwich bags, Box of garbage bags, Cash	F, 32-37 yrs, 5'8"-5'11", 152-162 lbs, Blonde hair color, Clerk same as Exhibit B

B. REMARKS

C. In the absence of indications that the subject store violates program regulations the investigation was terminated and the case is closed.

CERTIFICATION:

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SIGNATURE OF INVESTIGATOR



US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT

NA00266
11/13/2019

EXHIBIT A
RESULT: F

DETAILS OF TRANSACTION/VISIT :

I [REDACTED] Investigator, Contractor for the Food and Nutrition Service, United States Department of Agriculture, make the following statement freely and voluntarily, knowing that this statement may be used in evidence.

On the above date, at about (time) 02:09 PM. I entered subject store. As the clerk rang up the items, my issued Electronic Benefits Transfer (EBT) card was where it could be viewed by the clerk. I gave the clerk the EBT card, which had a total of \$400.00 in Supplemental Nutrition Assistance Program (SNAP) benefits. The clerk deducted \$10.16 for items purchased from the investigative EBT account. I departed the store at about 02:17 PM.

I entered the subject store, placed all items on the counter, and presented the EBT card to the clerk for purchase. The clerk, identified as [REDACTED] completed the transaction.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORTNA00266
11/13/2019EXHIBIT A
RESULT: F**CLERK INFORMATION**

SEX	AGE	HEIGHT	WEIGHT	HAIR	OTHER IDENTIFIERS
F	24-29	5'6" - 5'9"	130 - 140	Black	None
Identification During Transaction as: (Name) Clarissa			(Title, Relationship to Owner): Unknown		Means of Identification: Self-identified

EBT BENEFITS ISSUED, USED AND RETURNED:

EBT Card Number	Issued Value	Used Value	Returned Value
[REDACTED]	\$400.00	\$10.16	\$389.84

EBT RECEIPT: Y	CASH REGISTER RECEIPT: N	SALES TAX CHARGED: N/A	AMOUNT CHARGED: N/A
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AMOUNT OF PURCHASE [if known]	BENEFITS TRAFFICKED [if applicable]	CASH RECEIVED [if applicable]
\$10.16	N/A	N/A

MERCHANDISE RECEIVED [if applicable]:

QUANTITY	DESCRIPTION OF ITEM	TYPE	PRICE
1	Bag of cinnamon roll	E	1.09
1	Can of spam	E	3.99
1	Bag of candy	E	NPI
1	Bag of chips	E	NPI

NPI - NO PRICE INDICATED OR ILLEGIBLE

TYPE: E - ELIGIBLE, I - INELIGIBLE, M - MAJOR INELIGIBLE, R - REFUSAL, C - CREDIT, F - FREE / NO CHARGE

TRAFFICKING CASH DATA [if applicable]:

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT

NA00266
11/14/2019EXHIBIT B
RESULT: N

DETAILS OF TRANSACTION/VISIT :

I [REDACTED] Investigator, Contractor for the Food and Nutrition Service, United States Department of Agriculture, make the following statement freely and voluntarily, knowing that this statement may be used in evidence.

On the above date, at about (time) 03:25 PM. I entered subject store. As the clerk rang up the items, my issued Electronic Benefits Transfer (EBT) card was where it could be viewed by the clerk. I gave the clerk the EBT card, which had a total of \$354.46 in Supplemental Nutrition Assistance Program (SNAP) benefits. The clerk deducted \$10.18 for items purchased from the investigative EBT account. I departed the store at about 3:32 PM.

I entered the subject store, placed all items on the counter, and presented the EBT card to the clerk for purchase. The clerk removed the non-food items and stated that they could not be purchased using SNAP benefits. I asked the clerk to utilize the EBT card for the non-food items and the clerk refused. The clerk then completed the transaction for the food items only.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORTNA00266
11/14/2019EXHIBIT B
RESULT: N**CLERK INFORMATION**

SEX	AGE	HEIGHT	WEIGHT	HAIR	OTHER IDENTIFIERS
F	32-37	5'8" - 5'11"	152 - 162	Blonde	None
Identification During Transaction as: (Name)			(Title, Relationship to Owner):		Means of Identification:
Unknown			Unknown		None

EBT BENEFITS ISSUED, USED AND RETURNED:

EBT Card Number	Issued Value	Used Value	Returned Value
[REDACTED]	\$354.46	\$10.18	\$344.28

EBT RECEIPT: Y	CASH REGISTER RECEIPT: N	SALES TAX CHARGED: N/A	AMOUNT CHARGED: N/A
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AMOUNT OF PURCHASE [if known]	BENEFITS TRAFFICKED [if applicable]	CASH RECEIVED [if applicable]
\$10.18	N/A	N/A

MERCHANDISE RECEIVED [if applicable]:

QUANTITY	DESCRIPTION OF ITEM	TYPE	PRICE
2	Boxes of cereal (@ \$4.59 each)	E	9.18
2	Bags of soup	E	NPI
1	Box of spoons	R	
1	Bag of bowls	R	

NPI - NO PRICE INDICATED OR ILLEGIBLE

TYPE: E - ELIGIBLE, I - INELIGIBLE, M - MAJOR INELIGIBLE, R - REFUSAL, C - CREDIT, F - FREE / NO CHARGE

TRAFFICKING CASH DATA [if applicable]:

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORT

NA00266
11/16/2019EXHIBIT C
RESULT: N

DETAILS OF TRANSACTION/VISIT :

I, Miguel Ballejo, Investigator, Contractor for the Food and Nutrition Service, United States Department of Agriculture, make the following statement freely and voluntarily, knowing that this statement may be used in evidence.

On the above date, at about (time) 06:12 PM. I entered subject store. As the clerk rang up the items, my issued Electronic Benefits Transfer (EBT) card was where it could be viewed by the clerk. I gave the clerk the EBT card, which had a total of \$344.28 in Supplemental Nutrition Assistance Program (SNAP) benefits. The clerk deducted \$13.06 for items purchased from the investigative EBT account. I departed the store at about 06:22 PM.

I entered the subject store, placed all items on the counter, and presented the EBT card to the clerk for purchase. The clerk removed the non-food items and stated that they could not be purchased using SNAP benefits. I asked the clerk to utilize the EBT card for the non-food items and the clerk refused. The clerk then completed the transaction for the food items only. I asked the clerk for cash back off my EBT card, but the clerk refused.

US DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

INVESTIGATIVE TRANSACTION REPORTNA00266
11/16/2019EXHIBIT C
RESULT: N**CLERK INFORMATION**

SEX	AGE	HEIGHT	WEIGHT	HAIR	OTHER IDENTIFIERS
F	32-37	5'8" - 5'11"	152 - 162	Blonde	Clerk same as Exhibit B
Identification During Transaction as: (Name)			(Title, Relationship to Owner):		Means of Identification:
Unknown			Unknown		None

EBT BENEFITS ISSUED, USED AND RETURNED:

EBT Card Number	Issued Value	Used Value	Returned Value
[REDACTED]	\$344.28	\$13.06	\$331.22

EBT RECEIPT: Y	CASH REGISTER RECEIPT: N	SALES TAX CHARGED: N/A	AMOUNT CHARGED: N/A
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AMOUNT OF PURCHASE [if known]	BENEFITS TRAFFICKED [if applicable]	CASH RECEIVED [if applicable]
\$13.06	N/A	N/A

MERCHANDISE RECEIVED [if applicable]:

QUANTITY	DESCRIPTION OF ITEM	TYPE	PRICE
1	Bag of chips	E	5.09
1	Bottle of ketchup	E	2.99
1	Bottle of barbecue sauce	E	NPI
1	Package of bread	E	NPI
1	Box of sandwich bags	R	
1	Box of garbage bags	R	
	Cash	R	

NPI - NO PRICE INDICATED OR ILLEGIBLE

TYPE: E - ELIGIBLE, I - INELIGIBLE, M - MAJOR INELIGIBLE, R - REFUSAL, C - CREDIT, F - FREE / NO CHARGE

TRAFFICKING CASH DATA [if applicable]:

6. Donated Items

CR Tracking Number: NA00266

Exhibit ID: A

I certify that I received the following item(s) for use by my organization from the USDA Employee [REDACTED]
(National CR AO).

Items List:

Quantity	Description
1	Bag of cinnamon roll
1	Can of spam
1	Bag of candy
1	Bag of chips

Donation Date: 11/21/2019

Donated By [REDACTED] (National CR AO)

Donation Organization: Trinity Klein Church

Donation Receiver

Name: [REDACTED]

Title: GO Assistant Director

Organization Site Address and Phone

Address:

5201 Spring Cypress
Spring, Texas 77379

Phone: (281) 376-5773

The property item(s) donated as certified in Section 6 have been found to have no commercial value or the estimated cost of continued care and handling would exceed the estimated proceeds from the sale.

Receiver's Signature:

[REDACTED]

Investigator Signature:

6. Donated Items

CR Tracking Number: NA00266

Exhibit ID: B

I certify that I received the following item(s) for use by my organization from the USDA Employee Miguel Ballejo (National CR AO).

Items List:

Quantity	Description
2	Boxes of cereal (@ \$4.59 each)
2	Bags of soup

Donation Date: 11/21/2019

Donated By [REDACTED] (National CR AO)

Donation Organization: Trinity Klein Church

Donation Receiver

Name [REDACTED]

Title: GO Assistant Director

Organization Site Address and Phone

Address:

5201 Spring Cypress
Spring, Texas 77379

Phone: (281) 376-5773

The property item(s) donated as certified in Section 6 have been found to have no commercial value or the estimated cost of continued care and handling would exceed the estimated proceeds from the sale.

Receiver's Signature:

[REDACTED]

Investigator Signature:

6. Donated Items**CR Tracking Number:** NA00266**Exhibit ID:** C

I certify that I received the following item(s) for use by my organization from the USDA Employee [REDACTED]
(National CR AO).

Items List:

Quantity	Description
1	Bag of chips
1	Bottle of ketchup
1	Bottle of barbecue sauce
1	Package of bread

Donation Date: 11/21/2019**Donated By:** [REDACTED] (National CR AO)**Donation Organization:** Trinity Klein Church**Donation Receiver****Name:** [REDACTED]**Title:** GO Assistant Director**Organization Site Address and Phone****Address:**

5201 Spring Cypress
Spring, Texas 77379

Phone: (281) 376-5773

The property item(s) donated as certified in Section 6 have been found to have no commercial value or the estimated cost of continued care and handling would exceed the estimated proceeds from the sale.

Receiver's Signature:

[REDACTED]

Investigator Signature:

6. Donated Items

CR Tracking Number: NA00266

Exhibit ID: A

I certify that I received the following item(s) for use by my organization from the USDA Employee [REDACTED]
(National CR AO).

Items List:

Quantity	Description
1	Bag of cinnamon roll
1	Can of spam
1	Bag of candy
1	Bag of chips

Donation Date: 11/21/2019

Donated By: [REDACTED] (National CR AO)

Donation Organization: Trinity Klein Church

Donation Receiver

Name: [REDACTED]

Title: GO Assistant Director

Organization Site Address and Phone**Address:**

5201 Spring Cypress
Spring, Texas 77379

Phone: (281) 376-5773

The property item(s) donated as certified in Section 6 have been found to have no commercial value or the estimated cost of continued care and handling would exceed the estimated proceeds from the sale.

Receiver's Signature:

[REDACTED]

Investigator Signature:

6. Donated Items

CR Tracking Number: NA00266

Exhibit ID: B

I certify that I received the following item(s) for use by my organization from the USDA Employee [REDACTED]
(National CR AO).

Items List:

Quantity	Description
2	Boxes of cereal (@ \$4.59 each)
2	Bags of soup

Donation Date: 11/21/2019

Donated By: Miguel Ballejo (National CR AO)

Donation Organization: Trinity Klein Church

Donation Receiver

Name [REDACTED]

Title: GO Assistant Director

Organization Site Address and Phone

Address:

5201 Spring Cypress
Spring, Texas 77379

Phone: (281) 376-5773

The property item(s) donated as certified in Section 6 have been found to have no commercial value or the estimated cost of continued care and handling would exceed the estimated proceeds from the sale.

Receiver's Signature:

[REDACTED]

Investigator Signature:

6. Donated Items

CR Tracking Number: NA00266

Exhibit ID: C

I certify that I received the following item(s) for use by my organization from the USDA Employee Miguel Ballejo (National CR AO).

Items List:

Quantity	Description
1	Bag of chips
1	Bottle of ketchup
1	Bottle of barbecue sauce
1	Package of bread

Donation Date: 11/21/2019

Donated By [REDACTED] (National CR AO)

Donation Organization: Trinity Klein Church

Donation Receiver

Name [REDACTED]

Title: GO Assistant Director

Organization Site Address and Phone**Address:**

5201 Spring Cypress
Spring, Texas 77379

Phone: (281) 376-5773

The property item(s) donated as certified in Section 6 have been found to have no commercial value or the estimated cost of continued care and handling would exceed the estimated proceeds from the sale.

Receiver's Signature:

[REDACTED]

Investigator Signature: